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APPLICANTS

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** CONTINUING DATA *****

none / *ms*

** FOREIGN APPLICATIONS *****

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ms

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	NETHERLANDS	22	46	4

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TITLE *Method of determining therapeutic activity and/or possible side-effects of a medicament.*
Testing endosymbiont cellular organelles and compounds identifiable therewith.

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED 1422	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees (Filing)
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